

# CONTRACTUAL EMPLOYEES

## MEDICAL INSURANCE

### UMR (A UNITED HEALTHCARE COMPANY)

#### PPO Tier 1/Tier 2: SelectColorado/Select Networks

- Effective: First day of the month following hire date
- Deductible (Tier 1): \$350 Individual / \$700 Family
- Out-of-Pocket Max (Tier 1): \$5,000 Individual / \$10,000 Family
- Copay (Tier 1): \$0 Primary Care / \$40 Specialty
- Coinsurance (Tier 1): 80% Insurance / 20% You

#### High Deductible Health Plan (HDHP) with Health Savings Account (HSA)

- Employer contribution HSA
- Effective: First day of the month following hire date
- Deductible (In-Network): \$3,000 Individual / \$6,000 Family
- Out-of-Pocket Max: \$4,000 Individual / \$8,000 Family (In-Network)
- Coinsurance: 90% Insurance / 10% You (In-Network)

## HEALTH CLINIC CITYCARE

CityCare, managed by Marathon Health, is our onsite healthcare clinic providing services to employees and family members covered under the City's health plan. Staffed with a Physician Assistant and health coach, they treat a variety of common illnesses and injuries. A full range of prevention, health coaching, and assessments are provided in addition to sick care. There is no cost to use CityCare under the PPO Plan. For the HDHP, prevention is free, non-prevention \$45.

## LIFESTYLE MANAGEMENT

As part of the City's commitment to offering benefit coverage, which helps prevent injuries and illness, the following preventative services are available to employees and family members covered under the City's health plan.

#### Preventative Services Covered:

- Registered Dietitians
- Therapeutic Massage Therapy
- Acupuncture
- Biofeedback

These services are only a \$20 copay, with a \$500 maximum allowable benefit per service, per member, per year.

#### Under HDHP:

- No copay
- Pay total amount which applies towards deductible and out-of-pocket

## DENTAL INSURANCE DELTA DENTAL

Effective: First day of the month following hire date  
Prevention First: Diagnostic and preventative do not count against the annual maximum.

- Deductible: \$50 Individual / \$100 Family
- Max Benefit: \$2,000 annually
- Basic Dental: Plan pays 80%, after deductible (PPO Provider)
- Major Dental: Plan pays 50%, after deductible
- Orthodontia: Plan pays 50%, after deductible, Lifetime Max \$2,000
- Occlusal Guards/Night Guards: 50% after deductible

## VISION INSURANCE

### VSP (VISION SERVICE PLAN)

- Effective: First day of the month following hire date
- Examination: Every 12 months, \$15 Copay
- Lenses or Contacts: Every 12 months, Contact allowance up to \$185
- Frames: Every 24 months, Frame allowance \$185-\$205
- LightCare(TM): \$185 allowance for ready-made non-prescription sunglasses or blue light filtering glasses, Every other calendar year, \$25 Copay
- Primary EyeCare(SM): Additional services for members with diabetes, glaucoma, or age-related macular degeneration. Treatment and diagnosis of eye conditions, including pink eye, vision loss, and cataracts.



## **FLEXIBLE SPENDING ACCOUNTS (FSA)** **ALERUS**

FSA accounts allow you to set aside pre-tax funds to pay for eligible health and/or dependent care expenses before your federal and Social Security taxes are calculated.

- Health Care: employees may contribute up to \$2,850 per calendar year
- Dependent Care: employees may contribute up to \$5,000 per calendar year
- Carryover Provision: allows up to \$570 unused medical FSA contributions into the following year

## **BASIC LIFE INSURANCE AND AD&D** **RELIANCE STANDARD**

1x Annual Salary, up to \$250,000  
(employer-paid)

## **LIFE INSURANCE** **RELIANCE STANDARD (SUPPLEMENTAL)**

- Employee: up to \$1,000,000 in \$10,000 increments (Guaranteed Issue \$300K)
- Spouse: up to \$250,000 in \$5,000 increments (Guaranteed Issue \$30K)
- Child(ren): up to \$10,000 in \$2,000 increments

## **ACCIDENTAL DEATH & DISMEMBERMENT** **(AD&D)**

### **RELIANCE STANDARD (SUPPLEMENTAL)**

- Employee: up to \$550,000 in \$10,000 increments (cannot elect in more than 5x salary)
- Spouse: up to \$250,000 in \$5,000 increments
- Child(ren): up to \$10,000 in \$2,000 increments

## **PERSONALIZED BENEFITS** **AFLAC**

In the event of an accident or covered critical illness, these plans pay cash benefits directly to you, providing you the flexibility to help pay bills related to treatment or help with everyday living expenses.

### Accident Plan

- Employee Only
- Employee + Spouse
- Employee+ Children
- Employee + Family

### Critical Illness Plan

- Employee: \$10K, \$20K, or \$30K
- Spouse: \$10K, \$20K, or \$30K

\*Rates based on age and tobacco vs. non-tobacco status

### Features:

- Coverage is available for you, your spouse, and dependent children
- Fast claims payment-most claims are processed in about 4 business days
- Coverage begins the first of the month following 30 days from the date of hire

## **HEALTH ADVOCACY PROGRAM** **ALIGHT**

- Navigate Health and Benefit Plans
- Find In-Network, Highly-Rated, Cost-Effective Providers
- Coordinate Care
- Compare Costs for Procedures and Care
- Lower Cost Rx Options
- Help With Medical Bills and Claims Issues
- Medicare Assistance

## **HOLIDAYS**

11 designated holidays, a total of 88 hours per year (prorated for part-time employees)

### **Designated Holidays**

- New Year's Day
- Martin Luther King Day
- President's Day
- Memorial Day
- Independence Day
- Juneteenth
- Labor Day
- Veterans' Day
- Thanksgiving Day
- Day after Thanksgiving
- Christmas Day

After 6 months of continuous employment is completed, Contractual employees are credited with 2 additional floating holidays per Leave Benefit Year.

All designated holiday time not used will be forfeited at the end of the Leave Benefit Year.



## VACATION

Vacation time is accrued bi-weekly at 3.08\* hours per pay period for a total of 80 hours in a 12-month contract.

## SICK LEAVE

Contractual employees receive 40 hours of sick leave upon execution of their contract and shall additionally accrue 3.08\* hours of sick leave per bi-weekly pay period. The accrual of sick leave time shall not exceed 120 hours at any time during the term of the contract.

Contractual employees may not use more than 120 hours of sick leave in any 52-week period.

*\*Hours are based on full-time employment and are pro-rated for employees in part-time positions based on their FTE.*

*\*\*The employee's contractual agreement will supersede any benefits/leaves outlined in this benefit summary.*

## OTHER BENEFITS

- Award-Winning Wellness Program
  - Well Days Incentive Program
  - Group and On-Demand Exercise Classes
  - On-site Workout Facilities and Bicycle Storage
  - Lactation Support and Maternity Care
  - Lifestyle Management
  - Recreation Facility Passes
  - Wellness Coaching
  - Annual Health Fair
  - Health and Risk Assessment
  - Flu Shots
  - Financial Wellbeing Program
  - Behavioral Health Resources
  - Tobacco Cessation Programs
  - Mindfulness Resources
  - Parenting Support
  - Weight Management Program
- Care@Work: Back-Up Child and Adult Care and Referral Services
- Special Offers from Elevations Credit Union
- Employee Assistance Program-MINES & Associates
  - Legal Services
  - Financial Services
  - Referral Services
  - Counseling Services